Testimony of Mitchell A. Garber Medical Officer I Transportation Safety Ro

National Transportation Safety Board before the

Committee on Transportation and Infrastructure
U.S. House of Representatives
"FMCSA's Progress in Improving Medical Oversight
of Commercial Drivers"
July 24, 2008

Good afternoon, Chairman Oberstar, Ranking Member Mica, and Members of the Committee. Thank you for allowing me the opportunity to present testimony on behalf of the National Transportation Safety Board regarding Improving Medical Oversight of Commercial Drivers. It is a privilege to represent an agency that is dedicated to the safety of the traveling public.

On May 9, 1999, on Mother's Day in New Orleans, a commercial driver lost consciousness while driving a motorcoach on an interstate highway, left the roadway, and crashed into an embankment, killing 22 passengers, and seriously injuring the driver and 15 additional passengers (NTSB accident number HWY99MH017). The driver was found to have had multiple known serious medical conditions, including end-stage kidney failure for which he was receiving dialysis 3 hours a day for 3 days a week, and congestive heart failure for which he was receiving intravenous outpatient therapy for 3-4 hours a day, 3 additional days a week. He had seen dozens of health care providers over the previous 2 years, and had been issued a commercial driver's license medical certificate 9 months prior to the accident, in spite of having noted treatment for congestive heart failure on his application and having protein found in his urine at that time.

The Safety Board has investigated many other accidents involving commercial drivers with very serious preexisting medical conditions that had not been adequately evaluated. A sampling of such accidents are noted in the table below:

NTSB accident	Location	Circumstances	Driver medical
number			condition(s)
HWY98FH004	Franklin, NC	Load broke free from tractor-	Alcohol dependence
		trailer due to excessive speed,	
		killed driver and a child in a	
		school activity bus	
HWY98FH019	New York, NY	Transit bus injured cyclist,	History of seizures,
		killed pedestrian (driver had	multiple other medical

		seizure)	conditions
HWY98MH022	Buffalo, MT	School bus struck by train, 2	Keratoconus (nearly
		children killed	blind)
HWY00FH001	Central Bridge,	School bus drove through stop	School bus driver
	NY	sign, struck by dump truck, two	with poorly controlled
		students critically injured, three	diabetes, episodes of
		others and two adults seriously	congestive heart
		injured	failure
HWY00IH046	Jackson, TN	Tractor-trailer ran over Highway	Sleep apnea, untreated
		Patrol vehicle, killed State	hypothyroidism
		Trooper	
HWY01IH024	Bay St. Louis, MS	Motorcoach ran off of an on-	Uncontrolled insulin-
		ramp at a high rate of speed,	diabetes, forged
		multiple injuries	medical certificate
HWY04MH038	North Hudson,	Tractor-trailer struck the back of	Obesity-
	NY	a long line of stopped vehicles,	hypoventilation
		killing 4 vehicle occupants	syndrome

The Safety Board is not surprised by the findings of the Government Accountability Office study. Their findings mirror our own. The Safety Board, of course, investigates only a limited number of highway accidents and it is often the case that driver medical conditions might not be identified as a factor in such accidents absent the Board's extensive investigations and broad authority in conducting such investigations. It is important to note that the Board does not maintain statistics that would allow us to estimate the overall prevalence of such conditions in accident-involved populations or in the general driver population, but I can tell you that it is actually unusual in our accident investigations to find a commercial driver for whom there are not at least some questions regarding medical certification. This is not to say that the drivers' conditions always cause the accident, but finding these undocumented and unevaluated conditions in commercial drivers is concerning and often alarming. In many cases, these conditions, if they had been appropriately evaluated, treated and monitored, would not prevent the safe operation of a commercial vehicle. Unfortunately, because of a wide variety of deficiencies in the oversight of commercial driver medical certification, no such evaluation, treatment, or monitoring occurred in many of the cases we investigated.

As a result of observing serious deficiencies in the oversight of commercial driver medical certification in several of our investigations, the Safety Board issued recommendations to the Federal Motor Carrier Safety Administration (FMCSA) in 2001 to develop a comprehensive medical oversight program for interstate commercial drivers that included the following elements:

- Individuals performing medical examinations for drivers are qualified to do so and are educated about occupational issues for drivers. (H-01-17)
- A tracking mechanism is established that ensures that every prior application by an individual for medical certification is recorded and reviewed. (H-01-18)

- Medical certification regulations are updated periodically to permit trained examiners to clearly determine whether drivers with common medical conditions should be issued a medical certificate. (H-01-19)
- Individuals performing examinations have specific guidance and a readily identifiable source of information for questions on such examinations. (H-01-20)
- The review process prevents, or identifies and corrects, the inappropriate issuance of medical certification. (H-01-21)
- Enforcement authorities can identify invalid medical certification during safety inspections and routine stops. (H-01-22)
- Enforcement authorities can prevent an uncertified driver from driving until an appropriate medical examination takes place. (H-01-23)
- Mechanisms for reporting medical conditions to the medical certification and reviewing authority and for evaluating these conditions between medical certification exams are in place; individuals, health care providers, and employers are aware of these mechanisms. (H-01-24)

The Board's recommendations specify a comprehensive oversight program because we feel that only by addressing this issue in a systematic fashion can a truly effective program of oversight be developed. A piecemeal approach to the problem may result in gaping deficiencies that will continue to permit unqualified drivers to operate on the nation's highways. For example, even if all the other elements are in place, if no tracking mechanism exists, drivers who wish to will be free to obtain exam after exam until finding an examiner that will certify them.

In 2003, because of the critical importance of this issue and the lack of substantive progress on the recommendations, this issue was placed on the Board's Most Wanted List of Transportation Safety Improvements and it has remained there ever since. Although the FMCSA has in place a Medical Review Board and taken certain other preliminary actions in response to Congressional mandates, there are still areas in which absolutely no measurable progress has been made. For example, there has been no apparent attempt to develop a mechanism for reporting medical conditions in between examinations. Unlike aviation, where a concerned physician, family member, or employer knows to contact the Federal Aviation Administration with worries about the medical condition of a pilot, there is still no straightforward process by which an unhealthy commercial driver may be readily reported. In spite of limited progress, the commercial driver medical oversight system is no more robust now than it was nearly 10 years ago when the recommendations were first issued. The majority of the recommendations in this area are currently classified as "open - unacceptable response" and the current classification of the entire issue is considered to represent overall unacceptable progress. To paraphrase a previous Safety Board Chairman -- it is not that the current system is broken so much as that no viable system of medical oversight of commercial drivers currently exists. That is as true now as it was when the recommendations were issued. Though the FMCSA does seem to be making progress toward the type of comprehensive oversight system envisioned by the Safety Board, it remains to be seen whether such a system will in fact be developed.

This concludes my prepared statement and I will be happy to answer any questions you may have.